# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	Guide explains how to compl	ete this form.	1 ACCOUNT # (Ethics-Commission Filers)	2 Total pages file	<b>)</b>
3 CANDIDATE / OFFICEHOLDER NAME	NICKNAME LAS	etsemani <sup>st</sup>	MI SUFFIX	OFFICE Date Received	USE ONLY 2013 HAY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  change of address  5 CANDIDATE/ OFFICEHOLDER PHONE	ADDRESS / PO BOX: APT / SUITE 3609 Fort Bivd.  AREA CODE PHONE NU (915) 526-9	El Pa	STATE ZIP CODE  ASO, TX 79930  EXTENSION	Date Hand-delivered  Receipt #  Date Processed	LERK -2
6 CAMPAIGN TREASURER NAME	Ms. AI	na Maria st orales	MI SUFFIX	Dute Imaged	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEAS 3032 Monroe	SE); APT / SUITE #;	CITY: STATE: El Paso, TX	ZIP CODE 79930	`.
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NU (915) 494- 0		EXTENSION		
9 REPORT TYPE		h day before election day before election	Runoff  Exceeded \$500 limit	15th day aft treasurer ap (officeholder on Final report to	pointment
10 PERIOD COVERED	Month Day Year 04 .02 .2013	THROUGH	Month 05 0	Day Yezar 1 / 2013	
11 ELECTION	Adonth ELECTION DATE Day Year 05 / 11 2013	ELECTION TYPE Primary	. Runoll	X General	Special
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (	ity Council Distr	ict 2
	· ·	GOTOPA	GE 2		

# CANDIDATE/OFFICEHOLDER REPORT:

### FORM C/OH COVER SHEET PG 2

SUPPURI	& IUIAL	3	COVER SHEET PG	~
14 C/OH NAME			15 ACCOUNT # (Ethics Commission Fi	ilers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MA HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANI ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF	DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE O	or
	COMMITTEE TYPE	COMMITTEE NAME .	2013	3
	SPECIFIC	COMMITTEE ADDRESS		CIERK
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	<u> </u>	DEPT
		COMMITTEE CAMPAIGN TREASURER ADDRESS		•
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA ES. LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,405.00	
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITE	мідер \$ 919.32	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 6,839.81	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	\$ 1,217.79	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	* 0.00	
	oscribed before	is true and correct and includes a me under the 15, Flection Code.  Signature of Car  me, by the said	of perjury, that the accompanying repulation required to be reported and indidate or Officeholder, this the my hand and seal of office.	by
Signature of officer adn	NU J- LUY ninistering bati	Printed name of officer administering oath	Title of officer administering oat	ith

P.O. Box 12070

## SCHEDULE A

The	Instruction Guide explains how to complete this	s form.	1 Total pages Sch 1 Of 6	redule A:
2 FILER NAME Getseman	ni Yanez		3 ACCOUNT # (E	thics Commission Filers)
4 Date			7 Amount of	8 In-kind contribution
· Dute	Jesus and Carolina Salas		contribution (\$)	description (if applicable
4/3/2013	/3/2013		\$150.00	1
.7072010	6 Contributor address; City; State; Zip Code 15204 W. 152nd St., Olathe, KS 6		φ150.00	! 
			(If travel outside	 of Texas, complete Schedule T)
	pation / Job title (See Instructions)	10 Employer (See	•	
Counselor		Kansas Cit	<u>y, Kansas Pul</u>	blic Schools
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of	In-kind contribution
11010515	Daniel Quinones		contribution (\$)	description (if applicable
4/3/2013	Contributor address; City; State; Zip Code		\$15.00	
	250 K St. NE 715, Washington, D	DC 20002		
	ė		(If travel outside of	of Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Researche	ef	Self Employ	yed	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable
4/4/2012	Barbara Esparza		communication (#)	description (it applicable
4/4/2013	Contributor address; City; State; Zip Code		\$100.00	
	3610 Fort Blvd., El Paso, TX 7993	30	·	
			(If traval autaida	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I		or rexas, complete schedule 1)
Accountar	nt	Child Crisis	Center of Ell	Paso
Date	Full name of contributor		Amount of	In-kind contribution
	Jenny Enriquez		contribution (\$)	description (if applicable
4/4/2013	Contributor address; City; State; Zip Code		\$100.00	
	5101 Estes Parkway Lot 51, Long	view TY		
	o for Estes Funday Lot of, Long	VICW, 1X	(If travel outside o	 of Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Teacher		Pine Tree I	ndependent S	School District
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
414/0040	Thomas Sigala		contribution (\$)	description (if applicable
4/4/2013	Contributor address; City; State; Zip Code		\$200.00	
	1401 Adolph Carson, El Paso, TX	79936		<u> 20</u>
				3
Principal occur	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
	ctivities Director		ependent Sch	nool District 🔥 .
				requirements.
	ATTACH ADDITIONAL COPIES O	NE TUIC COUEDIN F	A C NEEDED	A X
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P.O. Box 12070

## SCHEDULE A

(512) 463-5800

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch 2 Of 6	edule A:	
2 FILER NAME			3 ACCOUNT # (E	thics Commission Filers)	
Getsemar	ni Yanez			,	
4 Date	5 Full name of contributor		7 Amount of	8 In-kind contribution	
4 Date			contribution (\$)	description (if applicable)	
11010010	Jose Medina				
4/8/2013	6 Contributor address; City; State; Zip Code		\$50.00		
	211 W. 56 St., New York, NY 10	019			
			·	of Texas, complete Schedule T)	
	pation / Job title (See Instructions)	10 Employer (See I		•	
Attorney a	Law	Self Employ	reu		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution description (if applicable)	
	El Paso Municipal Police Officers	Association	contribution (\$)	description (ir applicable)	
4/9/2013	Contributor address; City; State; Zip Code		\$2,500.00		
	• • • • • • • • • • • • • • • • • • • •	Dana TV 70004	\$2,300.00		
	747 E. San Antonio, Ste. 103, El F	Paso, 1X 79901			
	·		(If travel outside	I of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See I	nstructions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution	
	Elvis Cordova		contribution (\$)	description (if applicable)	
4/9/2013	Contributor address; City; State; Zip Code		\$50.00		
		\/A 00004	ψ50.00	' 	
	41 Underwood Place, Alexandria,	VA 22304		1	
			(If travel outside	of Texas, complete Schedule T)	
Principal occur	pation / Job title (See Instructions)	Employer (See			
Chief of S	taff	U.S. Depar	tment of Agric	culture	
Date	Full name of contributor  out-of-state PAC (ID#:_	)	Amount of	In-kind contribution	
	Maria Sanchez		contribution (\$)	description (if applicable)	
4/10/2013			<b>#50.00</b>	<u>'</u>	
.,	Contributor address; City; State; Zip Code		\$50.00	1	
	P.O. Box 446 Tatum, TX 75691			1	
·			(If travel outside	of Texas, complete Schedule T)	
Principal occur	pation / Job title (See Instructions)	Employer (See		or reads, complete constant //	
Accounts	Manager	Texas Bank	of Tatum		
Date	Full name of contributor out-of-state PAC (ID#:_	. )	Amount of	In-kind contribution	
Duic	Jennifer Torres		contribution (\$)	description (if applicable)	
4/11/2013			005.00	7	
4/11/2013	Contributor address; City; State; Zip Code		\$25.00	MAY-2	
	1200 Washington St. Apt. 3D, Hoboken,	NJ 07030		1 2	
			(if travel outside	of Tayas complete Schedula A	
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	of Texas, complete Schedule	
Professor		Columbia L		D <sub>L</sub>	
				7 7	
I .				• • •	

### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch 3 of 6	edule A:
			<del></del>	thics Commission Filers)
2 FILER NAME Getseman	i Vanoz		3 ACCOONT # (E	unics Commission Friers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
4/12/2013	Mickey Ibarra	4		
4/12/2013	6 Contributor address; City; State; Zip Code		\$500.00	
	1140 Connecticut Ave. NW Suite 1100, Washingt	on, DC 20036		
			(If travel outside o	of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See I		or reads, complete constant ty
Principal	·	Ibarra Strat	egy Group	
Date	Full name of contributor		Amount of	In-kind contribution
	Enrique Cortez		contribution (\$)	description (if applicable)
4/12/2013	Contributor address; City; State; Zip Code		\$500.00	
	10806 Fieldwood Dr., Fairfax, VA	22030	ΨΟΟΟ.ΟΟ	
	10000 i iciawood Br., i airiax, vit	22000		
		<b>5</b>		of Texas, complete Schedule T)
Principal occur President	pation / Job title (See Instructions)	Employer (See I Enitial Adva	anced Commu	unications
Date	Full name of contributor		Amount of	In-kind contribution
	William W. and Mary Navidomdsk	is	contribution (\$)	description (if applicable)
4/13/2013	Contributor address; City; State; Zip Code	,	\$100.00	
	2432 Savannah, El Paso, TX 799	30		
	•		(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I	. · · ·	
Self Emplo	oyed	Attorney at	Law	
Date	Full name of contributor		Amount of	In-kind contribution
	Mario and Maria Nutis		contribution (\$)	description (if applicable)
4/13/2013	Contributor address; City; State; Zip Code		\$200.00	
•	1361 Pearl Gate Pl., El Paso, TX	79936		
			(If travel outside	of Texas, complete Schedie T)
	pation / Job title (See Instructions)	Employer (See		37
iviedicai Di	octor/ Owner	Nutis Medic	cal, PLLC.	25 ~
Date	Full name of contributor out-of-state PAC (ID#_C	000347443	Amount of contribution (\$)	In-kind contribution  description (if applicable)
4/15/2013	Contributor address; City; State; Zip Code		\$500.00	A R
	P.O. Box 2069 Phoenix, AZ 850	001		DE!
			(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See	Instructions)	•

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(512) 463-5800

## POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Scho 4 of 6	edule A:	
2 FILER NAME Getsemar	ii Yanez		3 ACCOUNT # (E	hics Commission Filers)	
4 Date 4/19/2013	5 Full name of contributorout-of-state PAC (ID# El Paso Sheriff's Officers Associati 6 Contributor address; City; State; Zip Code		7 Amount of contribution (S) \$500.00	8 In-kind contribution description (If applicable)	
,	747 E. San Antonio, Ste. 103, El P	aso, TX 79901	(If travel outside o	of Texas, complete Schedule T)	
9 Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
4/19/2013	Contributor address: City: State; Zip Code P.O. Box 99100 El Paso, TX 7999	9	\$250.00		
Principal occur Owner	pation / Job title (See Instructions)	Employer (See In Tradeincars		of Texas, complete Schedule T)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
4/19/2013	Contributor address; City; State; Zip Code P.O.Box 524 Tatum, TX 75691		\$125.00		
	,			of Texas, complete Schedule T)	
Principal occup General F	pation / Job title (See Instructions) Oreman	Employer (See In Texas Easel	Employer (See Instructions) Texas Easement		
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
4/19/2013	Contributor address; City; State; Zip Code P.O.Box 524 Tatum, TX 75691		\$100.00		
Principal occu Retired	pation / Job title (See Instructions)	Employer (See Ir None		of Texas, complete Schered T)	
Date	Full name of contributor 📋 out-of-state PAC (ID# Gerald Rubin		Amount of contribution (\$)	In-kind contribution O description (if poplicable)	
4/21/2013	Contributor address; City; State; Zip Code 538 Laurel Canyon, El Paso, TX 7	79912	\$1,000.00	Of Texas, complete Scheet-Je T	
Principal occu CEO	pation / Job title (See Instructions)	Employer (See In Helen of Tro		,	

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## SCHEDULE A

(512) 463-5800

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch 5 of 6	edule A:
2 FILER NAME Getseman	ii Yanez		3 ACCOUNT # (E	thics Commission Filers)
4 Date	5 Full name of contributor □ out-of-state PAC (ID#: Hector Phillips, PC		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
4/22/2013	6 Contributor address; City; State; Zip Code		\$200.00	
	1017 Montana Ave., El Paso, TX 7	'9902 	(If travel outside	of Texas, complete Schedule T)
9 Principal occup Attorney a	pation / Job title (See Instructions) t Law	10 Employer (See I Self Employ	nstructions)	
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
4/26/2013	Contributor address; City; State; Zip Code		\$50.00	
	6566 Eagle Ridge Dr., El Paso, T	X 79912	(If travel outside	of Texas, complete Schedule T)
Principal occup Student	pation / Job title (See Instructions)	Employer (See I None		
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
4/29/2013	Contributor address; City; State; Zip Code		\$500.00	]
	701 Magoffin El Paso, TX 7990	) i	(If travel outside	of Texas, complete Schedule T)
Principal occup Attorney a	pation / Job title (See Instructions) t Law	Employer (See I Self Employ	nstructions)	
Date	Full name of contributor out-of-state PAC(ID# Lorene Perrin		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/30/2013	Contributor address; City; State; Zip Code	70040	\$40.00	I
,	6001 Pino Real Dr., El Paso, TX 7	9912	(If travel outside	of Texas, complete Schedule T)
Principal occu Realtor	pation / Job title (See Instructions)	Employer (See I Prudential E		or reads, complete oursease v
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
5/1/2013	Contributor address; City; State; Zip Code		\$100.00	D MA
	732 Azalea El Paso, TX 799	12	. (If travel outside	of Texas, complete Schedule 177
Principal occu Retired	pation / Job title (See Instructions)	Employer (See None	Instructions)	RR AM
	ATTACH ADDITIONAL CODIES			)EP;

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## POLITICAL CONTRIBUTIONS

## SCHEDULE A

OIHER	THAN PLEDGES OR LOAN	13		
The	Instruction Guide explains how to complete this	form.	1 Total pages Sche 6 Of 6	dule A:
2 FILER NAME Getsemar	ni Yanez		3 ACCOUNT# (Et	hics Commission Filers)
4 Date 5/1/2013	5 Full name of contributor ☐ out-of-state PAC (ID# Quixote and Associates, LLC. 6 Contributor address; City; State; Zip Code P.O. Box 497 El Paso, TX 7994	3	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable) Campaign Management
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See I	nstructions)	·
Date	Full name of contributor out-of-state PAC (ID# Contributor address: City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occu	pation / Job title (See Instructions)	Employer (See I	A	of Texas, complete Schedule T)
	Full name of contributor Out-of-state PAC (ID#		Amount of	In-kind contribution
Date	Contributor address; City; State; Zip Code		contribution (\$)	description (if applicable)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occu	upation / Job title (See Instructions)	Employer (See		
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
			/If travel outside	of Texas, complete Schedille T)
Principal occ	upation / Job title (See Instructions)	Employer (See		70
If	ATTACH ADDITIONAL COPIES contributor is out-of-state PAC, please see inst	OF THIS SCHEDUL truction guide forac	E AS NEEDED dditional reporting	g requirements.

## POLITICAL EXPENDITURES

## SCHEDULE F

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Legal Services Food/Beverage Expense Polling Expense

Printing Expense

P.O. Box 12070

Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

rees	The Instruction Guide explains how to		ter (enter a category not nated approx
1 Total pages Schedule F:	2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)
1 of 2	Getsemani Yanez		
-	5 Payee name		,
4/3/2013	Office Depot # 195		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$100.64	1111 Geronimo Dr., El Paso, TX 79	9925	
	(a) Category (See categories listed at the top of this schedule)	(b) Description (If trav	vel outside of Texas, complete Schedule T)
OF EXPENDITURE	OTHER	Office Supp	olies
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name I	Office sought	Office held
Date	Payee name		
4/11/2013	Claudia Fernanda Sigala		
Amount (\$)	Payee address; City; State; Zip Code		•
\$437.00	12317 Bill Mitchell, El Paso, TX 799	38	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If tra-	vel outside of Texas, complete Schedule T)
OF EXPENDITURE	Printing Expense	Printing of po	ostcards
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
4/12/2013	Walmart Supercenter		
Amount (\$)	Payee address; City; State; Zip Code	<u></u>	
\$161.00	5631 Dyer St., El Paso, TX 79904		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If tra	avel outside of Texas, complete Schedule T)
OF EXPENDITURE	Food/ Beverage Expense	Food and Bev	rerages for Fundraiser
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		# 4
4/12/2013	Walmart Supercenter		7.0
Amount (\$)	Payee address; City; State; Zip Code		NM
\$176.27	5631 Dyer St., El Paso, TX 79904		AM //
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If tra	avel outside of Texas, complete Schedule 1
OF EXPENDITURE	Food/ Beverage Expense	Food and Bev	verages for volunteers
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED

## POLITICAL EXPENDITURES

### SCHEDULE F

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Texas Ethics Commission

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense

Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F: 2 of 2	2 FILER NAME Getsemani Yanez	3 ACCOUNT # (Ethics Commis	sion Filers)
Date 4/17/2013	5 Payee name Tovar Printing		
6 Amount (\$)	7 Payee address: City: State; Zip Code	TV 70049	
\$920.13	645 Wallenberg Dr., Suit A-1, El Pa	SO, 1X 79912	
B PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule	÷T)
OF EXPENDITURE	Printing Expense	Printing of Postcards	
Complete ONLY if direct expenditure to benefit C		Office sought Office held	<u> </u>
Date 4/22/2013	Payee name Go Direct Mail Marketing		
Amount (\$)	Payee address: City; State; Zip Code		
\$1,508.23	8400 Boeing Dr., El Paso, TX 7992	25	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedul	e T)
OF EXPENDITURE	OTHER .	Mailing of Postcards	
Complete <u>ONLY</u> if direct expenditure to benefit C		Office sought Office held	cl
Date	Payee name		
4/25/2013	Tovar Printing		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00	645 Wallenberg Dr., Suit A-1, El Pa	iso, TX 79912	
PURPOSE	. Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedul	le T)
OF EXPENDITURE	Printing Expense	Printing of Letters	
Complete <u>ONLY</u> if direct expenditure to benefit (		Office sought Office	4.70
Date	Payee name		~
4/29/2013	Go Direct Mail Marketing	\ <u>\</u>	22
Amount (\$)	Payee address; City; State; Zip Code		777 -70
\$1,617.22	8400 Boeing Dr., El Paso, TX 799	25	RX 7
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Sched	le T)
OF EXPENDITURE	Other	Mailing of Letters	
Complete ONLY if dire expenditure to benefit		Office sought Office he	ld
-	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	